

JFW

TRANSMITTAL FORM

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OCT 02 2008

U.S. PATENT & TRADEMARK OFFICE

Total Number of Pages in This Submission

17

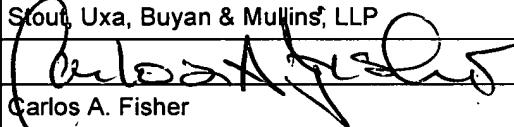
Application Number	10/800,992
Filing Date	March 15, 2004
First Named Inventor	Beck
Group Art Unit	1614
Examiner Name	Jagoe, Donna A.

Attorney Docket Number D-2804CON2

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (1page)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached (Check)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply (10 pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (1 page)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	- Declaration Under 37 CFR 1.132 (4 pages)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	- Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Stout, Uxa, Buyan & Mullins, LLP		
Signature			
Printed Name	Carlos A. Fisher		
Date	September 30, 2008	Reg. No.	36,510

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	JANET MC GHEE		Date September 30, 2008

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Fees Pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).

FEET TRANSMITTAL For FY 2008

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/800,992			
Filing Date	March 15, 2004			
First Named Inventor	Beck			
Examiner Name	Jagoe, Donna A.			
Art Unit	1614			
TOTAL AMOUNT OF PAYMENT	(\$)	120.00	Attorney Docket No.	D-2804CON2

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number 21-0890 Deposit Account Name Frank J. Uxa

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) associated with this communication Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEES CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
							Subtotal (1)
							0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple Dependent Claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
	-20 or HP =	x				
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			

-3 or HP = _____ x _____

HP = highest number of independent claims paid for, if greater than 3

Subtotal (2)

0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 =	/50=	(round up to a whole number)	x	=

Subtotal (3)

0

Fee Paid (\$)

4. OTHER FEE(S)

Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)

Non-English Specification: \$130 fee (no small entity discount)

1-month extension of time: \$120 fee (\$60 small entity discount)

2-month extension of time: \$460 fee (\$230 small entity discount)

3-month extension of time: \$1050 fee (\$525 small entity discount)

4-month extension of time: \$1640 fee (\$820 small entity discount)

5-month extension of time: \$2230 fee (\$1115 small entity discount)

Information Disclosure Statement Fee: \$180 fee (no small entity discount)

Notice of Appeal: \$510 fee (\$255 small entity discount)

Filing a Brief in Support of Appeal: \$510 fee (\$255 small entity discount)

Request for Oral Hearing: \$1030 fee (\$515 small entity discount)

Utility Issue Fee: \$1440 fee (\$720 small entity discount)

Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)

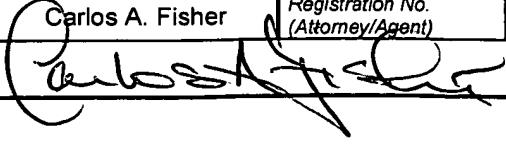
Request for Continued Examination: \$810 fee (\$405 small entity discount)

Other: _____

Subtotal (4)

120.00

SUBMITTED BY

Name (Print/Type)	Carlos A. Fisher	Registration No. (Attorney/Agent)	36,510	Telephone	949-450-1750
Signature			Date	September 30, 2008	

